

CLAIMS ONLY

Application Number

Application Number  
12-1608901

Filing Date

Applicant(s)

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT			* May be used for additional claims or amendments					
	Indep	Depend	Indep	Depend	Indep	Depend			Indep	Depend	Indep	Depend	
1	/							51					
2	/							52					
3		/						53					
4		/						54					
5		/						55					
6		/						56					
7		/						57					
8		/						58					
9		/						59					
10		/						60					
11		/						61					
12		/						62					
13		/						63					
14		/						64					
15	/							65					
16	/							66					
17		/						67					
18		/						68					
19		/						69					
20		/						70					
21		/						71					
22		/						72					
23		/						73					
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26		/						76					
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31		/						81					
32		/						82					
33		/						83					
34		/						84					
35		/						85					
36		/						86					
37	/							87					
38		/						88					
39		/						89					
40	/							90					
41		/						91					
42		/						92					
43		/						93					
44		/						94					
45		/						95					
46		/						96					
47		/						97					
48		/						98					
49		/						99					
50		/						100					
Total Indep	6							Total Indep					
Total Depend	21							Total Depend					
Total Claims	27							Total Claims					